



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

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STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
RADCLIFFE	JOHN	H.	808-536-7557
MAILING ADDRESS (Street)			FAX
222 SOUTH VINEYARD STREET, SUITE 401			808-599-4340
(City)	(State)	(Zip Code)	
HONOLULU	HAWAII	96813-2453	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
RADCLIFFE & ASSOCIATES, LLC			808-536-7557
MAILING ADDRESS (Street)			FAX
222 SOUTH VINEYARD STREET, SUITE 401			808-599-4340
(City)	(State)	(Zip Code)	
HONOLULU	HAWAII	96813-2453	

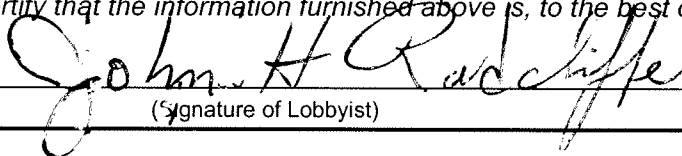
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
REYNOLDS AMERICAN INC.		336-741-0440
MAILING ADDRESS (Street)		FAX
401 NORTH MAIN STREET		336-741-4401
(City)	(State)	(Zip Code)
WINSTON-SALEM	NC	27102
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
JOHN J. HOGAN		336-741-0440
MAILING ADDRESS (Street)		FAX
401 NORTH MAIN STREET		336-741-4401
(City)	(State)	(Zip Code)
WINSTON-SALEM	NC	27102

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input checked="" type="checkbox"/> Other: (indicate below) |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | <u>TOBACCO</u> |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.


(Signature of Lobbyist)

7/10/07
(Date)

PART V AUTHORIZATION TO LOBBY

NAME

JOHN J. HOGAN

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

REGIONAL DIRECTOR

NAME OF ORGANIZATION (if applicable)

REYNOLDS AMERICAN INC.

TELEPHONE

336-741-0440

MAILING ADDRESS (Street)

401 NORTH MAIN STREET

FAX

336-741-4401

(City)

WINSTON-SALEM

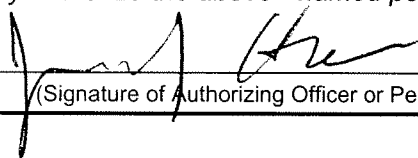
(State)

NC

(Zip Code)

27102

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.


(Signature of Authorizing Officer or Person Represented)

7/9/07
(Date)